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ON PILES.

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ONE of the most frequent, and, if ever diseased action may be so considered, *salutary* consequences of stricture of the rectum, is the formation of piles, than which an affection more common to all classes and ages of people could not perhaps be mentioned. So prevalent, indeed, is the disease in this country, that till it has proceeded to some considerable extent, persons not unfrequently do not consider it requisite to consult their medical advisers upon the subject, but are content either to use the nostrums of some reputed quack, or such topical applications as may be recommended by some kind friend, who has experienced relief from the like source. In the milder forms of piles, surgical attendance is not always necessary; too often, however, from protracted neglect, they become an equally formidable and painful malady.

A just consideration of the causes of any disease will be our best guide not only to prevent its occurrence, but likewise as to the method of treatment we should adopt for its removal or alleviation; let us therefore briefly inquire into the causes of piles.

Various as these will be found, they all tend towards the same results; viz. deposition in the cellular tissue, which unites the mucous and muscular tunics of the rectum; distension of the minute vessels of its mucous coat, and more or less enlargement of the hæmorrhoidal veins. Piles may therefore be produced by any circumstance, constitutional or mechanical, which preternaturally excites, or mechanically obstructs, the circulation in these particular parts. Thus they not uncommonly arise from an injudicious perseverance in the use of peculiar or violent purgative medicines, or excessive bodily exertion, particularly horse exercise; hence, also, results the prevalence of the disease in persons accustomed to a sedentary mode of life, the warmth excited from the constant sitting position of the body promoting an inordinate action in the vessels of the lower part of the rectum; while the want of proper exercise induces a torpid and confined state of the bowels, in a great degree assisted by a deficiency in the biliary secretion.

I believe the disease is often caused, or much increased, from the fashionable, yet pernicious custom of sitting upon chairs having hair or stuffed seats. Persons, especially those whose occupations are of a

sedentary description, should accustom themselves to use chairs, the seats of which are composed of cane, formed into a net work.

The soft blue hæmorrhoidal tumor which may be said to be the true pile, will always be found in conjunction with an enlarged, or otherwise diseased condition of the liver, which circumstance is physiologically explained, when we consider the immediate connection that exists between the *vena portæ* and the hæmorrhoidal veins. From this cause, these veins will sometimes become distended to so great a degree, as to form tumors of a very considerable size; and I have seen an instance, in which from extreme enlargement of the hæmorrhoidal veins, the fore-finger could not be introduced into the rectum beyond the first joint; the patient was likewise the subject of fistula in ano.

Another effect of irritation in the rectum is, that coagulable lymph is from time to time thrown out upon the inner coat of the intestine, but more particularly in the cellular tissue which connects the mucous and muscular portions of the bowel. This deposition organizes and gradually increases, till at last a huge mass of superstructure is formed, which is productive of extreme annoyance and exquisite suffering.

But another and extremely prevalent cause of the disease will be found in a contracted condition of some part of the rectum, which causes an accumulation of *feculent* matter in the bowel; this necessarily irritates it, and sooner or later produces ulceration of some portion of its mucous surface; while the perpetual straining which accompanies the desire to relieve the bowels, the result of the accumulation, injects the minute vessels of the intestine, distends, and finally causes them to rupture; from which sources arise the hæmorrhage, more or less experienced by those who are subject to piles. Now it is not always judicious, suddenly to correct this effect, for although it is a diseased action, it, not unfrequently, is the mode by which nature relieves herself, and it thus, perhaps, prevents the formation of a more serious disease.

The foregoing is, as I believe, a brief and simple, yet correct, narrative, both of the formation of piles, and of the hæmorrhoidal excrescence; and I next proceed to a few practical observations on the treatment of these diseases.

This, in a great measure, must necessarily depend upon the cause from which the disease arises. Should it be connected with any hepatic affection, we of course principally direct our efforts to restore the healthy state of the liver. Surprising relief will often be imparted from the loss of four or six ounces of blood at intervals repeated according to the discretion of the medical attendant. This may be taken either from the arm or by the application of cupping glasses to the region of the liver; the latter is, perhaps, the most preferable mode. The application of leeches to the orifice of the bowel is a valuable remedy, in those instances when the tumors are situate within the sphincter; but when they are external to it, I have often found that more irritation is produced from the bites of the leeches than benefit from the quantity of blood which they abstract. Not unfrequently they induce great tumefaction of the parts, which seriously aggravates the patient's sufferings. But in the cases of internal piles, especially those which are attended

with any hepatic disease, the use of leeches will be found of great service, for they not only diminish the general volume of the blood, but, by unloading the vessels at the inferior portion of the alimentary canal, operate more immediately upon the affected parts.

I have lately been in the habit of puncturing that description of pile which is almost wholly produced from distension of the hæmorrhoidal veins, with the acupuncture needle; by this method some ounces of blood may be abstracted, which will afford instantaneous relief to the patient. This plan may be adopted almost *ad libitum* by the medical attendant, and is entirely free from that apprehension of real, or imaginary danger, which by some is considered to belong to dividing these veins with the lancet; which latter practice I have often adopted with great service; neither have I ever found any untoward result from it. Furthermore, I am acquainted with an individual who was in the habit of performing this operation on his own person, a practice which, notwithstanding its successful issue, cannot be too strongly reprobated.

Evaporating washes* are of service, not only by alleviating the inflammation in the piles, but also that irritability of the sphincter which almost invariably accompanies the disease, to a greater or less extent. I prefer using these in a tepid state, for when they are applied cold, patients are oftentimes not sufficiently cautious respecting their use; either from inattention, or dislike to the momentary feeling produced from the application of cold, they permit the linen rag to get dry; hence an increase instead of a diminution of the local action ensues.

A gentle stimulus by an ointment applied to the sphincter twice or thrice in the course of the day, will, in the milder attacks of the disease, not uncommonly be of essential benefit;† this plan will not, however, agree with all constitutions, and should therefore be adopted with caution.

The administration of medicine forms a most essential part of the treatment of the disease. It is well known that particular drugs, as for example aloes, exercise a peculiar action upon the intestinal canal; such description of medicines are therefore to be avoided; large doses of any kind of purgatives adopted as a habit are improper; nevertheless, as the disease is often connected with extreme costiveness, it is best at the commencement of an acute attack, to give a brisk dose of medicine, so as fully to unload the intestinal canal, and by such means facilitate the progress of the circulation through the rectum. In the milder forms of the complaint, the bowels may be kept regular by the use of small doses of castor oil, the confection before prescribed, milk of sulphur, or any mild aperient.

The use of *enemas*, when the situation of the tumors admits of the

* I have been in the habit of using the following formula.

Recipe, Spirit. Rorismar. ℥ii.

Aque Am. Acet. ℥iv.

Mist. Camphoræ, ʒx.

Misce. Fiat lotio.

† Recipe, Pulv. Gum. Camphoræ, ʒss.

— Galle, ʒi.

— Opii, ʒi.

Ung. Flor. Samb. ʒi.

Misce. Fiat Unguentum.

ready introduction of the pipe, ought never to be omitted; they not only lessen the local irritability of the parts, but sometimes, by removing the feculent collections in the intestine, supersede the necessity for any kind of aperient medicine. All violent exercise, particularly riding, must be abstained from. These, together with a reasonable attention to diet, constitute the principal features to be observed in the ordinary treatment of piles. With the most cautious attention, however, the disease will not unfrequently progressively increase, till at last we are compelled to relieve our patient's affliction by the means of operative surgery; and this brings me to the next division of my subject, viz. the removal of the *Hæmorrhoidal Excrescence*.

It does appear to me somewhat extraordinary that the course of treatment adopted by those of the profession who have more particularly studied this subject, should be so widely dissimilar. While we find some authors recommending the removal of the hæmorrhoidal excrescence by excision, we read of others who advise, with equal confidence, its extirpation by the ligature. True it is, that by far the larger portion of those who, by their experience, may be counted valuable authority on the subject, are favorable to the operation by excision; thus, among the ancient writers on surgery, we find it was adopted by Wiseman, Petit, Le-dran, Sabatier, as well as by many of the present day, such as Abernethy, Hey, Fletcher, Ware, Home, Kirby, and Dupuytren. On the other hand, Mr. Pott, Sir Astley Cooper, Mr. Copeland, Mr. Howship, and others, practically acquainted with the subject, appear to favor the removal of the disease by the ligature.

With such a weight of evidence before me, it may, perhaps, be considered presumptuous to offer any decided opinion upon the subject. I believe, however, that although both descriptions of operations are occasionally liable to objections, these not unfrequently originate either in the circumstance of the operation being injudiciously undertaken, or unskillfully performed; and that, if the subject is dispassionately considered in all its bearings, the weight of evidence will greatly preponderate in favor of the removal of the disease by excision.

To substantiate this position, let us suppose the instance of a surgeon being consulted by a patient suffering from an extreme case of the hæmorrhoidal excrescence. He inquires into the state of the patient's general health, and ascertains that he has not any enlarged or otherwise diseased condition of the liver; no stricture in the rectum, nor any organic affection to which the formation of the excrescences may be reasonably attributed. He examines the part, and discovers one or many tumors originating in the rectum, and either protruding externally, or being within the sphincter. On what is he to found his judgment as to the removal of the diseased parts, by excision or by ligature? I should say not so much upon the size of the tumors and their extent of attachment to the rectum, as upon the condition of the hæmorrhoidal veins. When the tumors are *external* to the orifice of the bowel, there cannot, I think, be a question as to the manner in which we ought to proceed; since, as we are able to quell any hæmorrhage which may

ensue, we have a perfect control over the only circumstance which, in this instance, militates against the operation by excision.

In the removal by ligature we shall have to encounter much local irritation, and not unfrequently severe constitutional disturbance, over which, when it is once excited, we have a very limited control. Provided there are several tumors, which is a common occurrence, we shall be necessitated to perform several operations. The application of the ligature is usually extremely painful, its operation tedious, and not unfrequently incomplete, by reason of the base of the tumor being left, which forms a nidus for the return of the disease; neither is the danger from hæmorrhage entirely removed, for sometimes the ligature will get loose, and slip off before the vessels are completely separated. I know an instance where this circumstance occurred, and which had nearly proved fatal to the patient. The treatment after the removal of the tumors is likewise protracted; and, lastly, it is, I think, inapplicable where there is any material distension of the hæmorrhoidal veins.

The application of ligatures to veins is, I think, one of the most uncertain operations in surgery. I have so often seen fatal results follow their use, that I confess I am not a little prejudiced against the operation; and I believe that the failure of the removal of the excrescence by the ligature, is often referable to the injudicious manner in which it is placed upon the enlarged hæmorrhoidal veins.

Now the removal of the excrescence by excision is more expeditious, it is more complete, the pain is less, as is the danger either of local inflammation or of constitutional disturbance, the parts heal more kindly, and finally, when we are compelled to divide the enlarged hæmorrhoidal veins, the probable danger from hæmorrhage is not by any means so great, as that which is to be apprehended from the constitutional and local disturbance which almost invariably follows the including of them in a ligature.

A reasonable objection may be advanced against the operation by excision, in the division of the mucous membrane of the part; but I would fearlessly ask, Is the danger of inflammation from this cause greater than that which is likely to ensue from the application of a ligature to the same part? I should think not.

I can only say, that I have for many years been in the habit of performing the operation by excision, and that with the most perfect success; occasionally, I have had to encounter hæmorrhage; but never, save in one instance, to such an extent as to endanger the life of the patient. I am inclined, therefore, to believe, that when bleeding ensues to any material extent, the tumors are accompanied with an enlarged or otherwise diseased condition of the liver, with stricture of the bowel, or such an unhealthy condition of the constitution, as may give rise to an hæmorrhagic disposition in the vessels at the lower part of the alimentary canal; and, in the neglect of the due observance of any of which circumstances, not only the danger, but the unsuccessful issue of *EITHER* description of operation is very likely to originate.

And here I think I should be guilty of no inconsiderable dereliction of duty, was I to omit adverting to the careless manner in which these

tumors are frequently removed. Not only are the causes of the disease altogether lost sight of, but its extirpation decided upon without the slightest degree of constitutional preparation; indeed, were we to judge from the observations delivered in some of the medical schools of this metropolis, it might reasonably be supposed that the excision of piles was an operation, altogether so simple, that it might be performed at the convenience either of the surgeon or his patient. More than once have I known fatal results to arise from this mistaken confidence, this injudicious, not to say rash proceeding; which, though it may be practised perhaps many times without any untoward result, is certain eventually not only to end in the compromise of the surgeon's reputation, but in what is of much greater moment, the loss of human life.

Prior to the removal of the hæmorrhoidal excrescence it is the duty of every surgeon carefully to survey the various points to which I have alluded; and, above all, cautiously to examine into the condition of the rectum; for, in the early stages of piles, where the disease is accompanied with any contraction of the bowel, we shall often be able to mitigate the former by the removal of the latter; I have seen many instances which confirm this observation.

CEANOTHUS AMERICANUS.

[THE Southern Medical Journal copies from our Journal of the 30th Sept. last, the remarks of our correspondent, Dr. D. H. Hubbard, on the remedial powers of the above-named article, and adds the following valuable information. We would particularly invite correspondents and readers to furnish us with the results of their experience in the use of indigenous vegetable productions. There is a remissness in this respect which is unworthy the members of a liberal profession, and which ought to be speedily abandoned.]

We are pleased to see such articles as the above, brought before the public by industrious and faithful observers—articles with which our country abounds; and as valuable as, not to say more so, in many instances, than those which are imported at great cost and trouble.

Distance and cost seeming to place a peculiar value on others of their kind, whereby we are often decoyed into a preference for them; the bounties of Providence by which we are surrounded are but too often contemned or disregarded.

The *Ceanothus Americanus* is one of the most abundant of the small shrubs found on our dry sandy soils. In this section of the country it is known to all the country people by the common names, Red Root, Red Shank, &c.; and were its virtues well known amongst practitioners, it is sufficiently abundant to be made an article of commerce, of comfortable profit to its preservers.

In situations remote from medical aid, and, indeed, in most families in the country, it is in constant successful use as a styptic and astringent.

The observations of many years enable us to confirm the remarks of Dr. Hubbard relative to its virtues in aphthous affections.

In thrush in children, it is itself a remedy not inferior to borax, which has been so long in universal use. In those cases of Fluor Albus which are attended with aphthous eruptions, it has been found as uniformly profitable as any remedy of its kind of power; and as generally corrective, as abiding and still operating causes of this eruption would allow. In those cases of Fluor Albus which depend on prolapsus, or descent of the womb into the vagina, which constitute no small proportion, there is probably not a better astringent lotion in use than its stronger preparations, for permanently correcting that relaxation of the vagina which exists in these cases.

In obstinate diarrhœa, the bark of the root has been long in successful use. In the troublesome discharge and ulcerations of the second stage of salivation, it has been long and successfully administered. The strong decoction of the bark of the root, also the bark of the fresh root itself, have been found by experience amongst the most valuable styptics in domestic use, for restraining hæmorrhage from wounds. A tea of the leaves and flowers, sweetened with fine sugar, &c. which is not an unacceptable offering to the palate and stomach, is finely adapted to diarrhœa and relaxation of the bowels generally, particularly in children, and those troublesome habitual cases unattended with febrile action, in which we have reason to apprehend the presence of aphthæ, or ulceration, in the mucous membrane of the intestines.

It has also been found useful in those highly dangerous cases of hypercatharsis induced by the ruinous power of lobelia in the hands of the Thomsonians, and which so often ends in permanent relaxation of bowels and loss of all powers of nutrition, and consequent death.

In such cases, a tea of the leaves and flowers may be very advantageously prescribed, more or less exclusively, as a diet. This tea will generally be found not only admissible, but remedial in those cases of dyspepsia in which the bowels are perpetually relaxed, and the digestive and nutritive functions suspended.

CASES, WITH OBSERVATIONS.

BY F. M. ROBERTSON, M.D. OF AUGUSTA, GEO.

THOSE who have devoted their attention, in any degree, to the subject of Phrenology, are aware of the function assigned to the cerebellum, in the arrangement of this system. The science not only recognizes separate and distinct elementary faculties, but these faculties are manifested by means of separate and distinct cerebral organs. Appeals are made, by those who advocate the science, not only to the physiological laws which govern the progressive development and decline of the encephalic mass, but also to its anatomical structure, the pathological state of the organs, and the derangement in the manifestations of the functions dependent thereon. From these sources, a mass of evidence may be accumulated, which

will almost set opposition at defiance; for one fact is worth a volume of abstract reasoning; and, while the flimsy tissue, of which the latter is composed, is made to vanish before the superior light of truth and observation, the former stands unaltered in its intrinsic nature.

Many cases, having the same bearing upon this point, as the two we are about to relate, may be found in the surgical observations of Baron Larrey—some of them are so remarkable, and apparently unnatural, that they would at once appear questionable, was it not that the veracity of the author stands “above suspicion.”

Case 1st. On the 6th of October, 1834, I was called to a negro man between thirty-five and forty years of age, who had fallen through a dray while his horse was in motion. In descending, the back of his head and neck struck one of the cross-bars of the vehicle with such force as to produce a severe concussion and fracture of the fourth and fifth vertebræ of the neck. The details of the case, so far as relates to the symptoms consequent upon the fracture of the vertebræ and compression of the spinal marrow, and the appearances on dissection, are recorded in another Medical Journal.* The patient lived thirty-three hours after the accident occurred. On the day after the injury was received, from his having voided no urine, a distension of the bladder was feared, to obviate which the introduction of the catheter was proposed. On examining the parts, previous to the introduction of the instrument, the *penis was found to be in a state of rigid erection*. The catheter was introduced, but no urine followed. The penis continued in a state of priapism until the death of the patient, and though the instrument was introduced repeatedly, not more than an ounce of urine came away. Upon pressure above the pubes, no marks of a distended bladder could be observed. No twitching of the muscles, or the slightest convulsion, occurred during the progress of the case; so that the priapism could not be accounted for upon the grounds of a spasmodic action. Doctors Cunningham, Patterson, and J. E. Bacon, visited the case with me, and the two last-named gentlemen witnessed the introduction of the catheter. Independent of the fracture of the spine, a severe blow was received immediately over the region of the cerebellum. It is to be regretted that the examination, post mortem, could not have been carried beyond the fractured portion of the spine; but as this was performed clandestinely, it was impossible, under the circumstances, to proceed further.

Case 2d. This case occurred during the late Seminole campaign, and was related to me by Dr. Ogleby, the Surgeon to the Georgia Battalion of Volunteers under Major Cooper. In the engagement with the Indians, in what is termed the cove of the Ouithlacoochee, on the morning of the 31st March, Mr. Robinson, a member of the Louisiana Volunteers, received a rifle ball in the back of the head. It entered behind the ear, immediately over the region of the cerebellum, and penetrated through the skull, and was supposed, by his medical attendants, to have lodged in the substance of this portion of the encephalon. His symptoms were those usually developed by such injuries, and contrary to the

* North American Archives, vol. 1st, page 391.

expectations of his friends, he lived several days after the wound was received, notwithstanding the unfavorable circumstances under which the army labored relative to hospital comforts and suitable transportation for the sick. As the main body of the army took up the line of march for Tampa Bay, on the 1st of April, he was left under the care of Dr. Ogleby, at Fort Cooper. In the progress of the case, the Doctor found it necessary, in consequence of the accumulation of urine in the bladder, to introduce the catheter; and, to his surprise, when the penis was exposed, for the purpose of performing the operation, *it was found to be in a state of rigid erection.* The instrument was introduced and the urine evacuated, but the *penis remained in a state of permanent erection until the death of the patient.* The reaction, of course, was considerable after the reception of the injury, and it is reasonable to suppose that the portion of the encephalon nearest the foreign body must have suffered most, from the consequent inflammation.

In this case one might suppose that the priapism was occasioned, partly, by the stimulus of the excessive quantity of urine accumulated in the bladder; but this supposition is completely set aside by the first case, in which no urine at all was secreted for nearly thirty-three hours, and yet the priapism was as complete as in the second case; and again, in the latter case, the evacuation of the urine produced no change whatever in this singular symptom.

Those who have any curiosity to look further into this singular subject, are referred to the work of Gall on the functions of the brain, Spurzheim's system of phrenology, and Baron Larrey's surgical observations. The object of this article is not to discuss the principles of phrenology, or to enter into an elaborate defence of the science, against the many unfounded and unjust imputations which have been brought against it, but merely to give two cases, which certainly claim some merit as facts in proof of the science. Many of our readers will be inclined, no doubt, to underrate the bearing which these cases have upon the point in question, but we feel assured that strict observation cannot fail to render almost positive, even with the most skeptical, many of the positions maintained by the advocates of the doctrine; for the truth of the fundamental principles of phrenology may now be considered as established upon too firm a foundation to be overthrown by the ridicule of its opponents. The science has recovered from the momentary shock which was given to it by this once powerful engine. Facts are now looked upon as more important than opinions, though the latter may claim high sources as their origin, and appeal to the consecration of antiquity. These are no longer a barrier to the investigator into the laws of nature, and fashion now possesses no terror to him, who, seeking for truth, resorts to the universal volume, in which the hand of Infinite Wisdom has inscribed His immutable laws. The science of phrenology is based upon observation, and our opponents must resort to the same course before they can hope to arrive at their ultimate end. Ridicule we do not fear, and an appeal to observation is all we ask. If the science be contrary to facts, let it perish; but, if supported by the truths of nature, its own omnipotence will vanquish every foe.—*Southern Med. and Sur. Jour.*

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IRRITATION OF THE NERVES.

ON the 25th of May last, Dr. Andrew Nichols, of Danvers, delivered before the Fellows of the Mass. Medical Society a discourse on irritation of the nerves, which has been published, and probably distributed over the Commonwealth. The Society's pamphlet, in which it appears, only came to hand about ten days ago, which is the apology we are disposed to make for not having sooner presented our readers with a synoptical outline, at least, of a well-drawn-up paper. Our impression, at the time it was read, was a favorable one, notwithstanding a remark by some one near by, that it was altogether too long. Perhaps it might have been so for a man who thought more of his dinner than professional responsibilities; but the physician—one especially who entertains any regard for the character of the profession, would willingly forego the table for a treat like this, of sound, doctrinal observations on disease, by a skilful, experienced practitioner. There seems to be more of it on paper than in its original condition before the audience: perhaps this may have been brought about by appending notes at the end. However, on no account would we have it even suspected that there is too much, as no portion could well be dispensed with.

Dr. Nichols might very easily have continued the manuscript, till it assumed the dimensions of a volume that would have acquired for him a name and reputation abroad. There are some preliminary remarks, varying between the first and fourteenth page, which were somewhat necessary under the circumstances in which Dr. Nichols was placed, but which are by no means essential to the main body of the article. We consider the author to have commenced at page 371—in the following words—

"All action, I have said, is dependent on the nerves. I am aware that A. P. W. Philip, and others, consider muscular irritability independent of nervous influence. But what is muscular fibre, separated from nervous tissue? who has seen it? whose experiments are satisfactory on this subject?

"As at present informed, the term *nervo-muscular*, as used by Marshall Hall, agrees best with my ideas of what is otherwise called the muscular tissue,—the extremities, perhaps, of the nerves of motion, modified and fitted for the function required. When chemically analyzed, nerve and muscle are found composed of the same elements, differing a very little in the proportion which they bear to each other. And is it absurd to suppose, that living albumen may become living fibrin, and retain all the excitability of its original structure?

"In the same manner, the extremities of the ganglionic nerves may be supposed to form or amalgamate with the contractile coats of the arteries, capillaries, veins, &c. endowing these parts with the irritability necessary to the function required of each.

"When this theory is viewed in connection with the numerous physiological facts, which prove action in every tissue, and in every part, produced, modified, suspended, or destroyed, by causes which act and can

act only on and through the nervous system, I feel constrained to adhere to the position just stated—that *all action, and, of course, all disease, is dependent on that system.*

“The investigations, experiments, and facts collected, stated, and commented upon, by those medical authors who have recently written most largely on spinal irritation, hysteria, and other nervous disorders, have thrown much light on the phenomena of disease in general, and will, I believe, when followed out to their legitimate results, lead to successful practice in many complaints, which have hitherto been deemed incurable.

“To avoid circumlocution, the result of these inquiries is so far anticipated, as to state that diseases may be naturally divided into four classes.

“1. Neuralgic, affecting principally the nerves of sensation.

“2. Spasmodic, affecting principally the nerves of motion.

“3. Inflammatory, febrile, and organic, affecting primarily the ganglionic nerves.

“4. Mental, affecting the moral and intellectual portions of the nervous system.”

In the first class, the author begins to exhibit himself. We like to witness this boldness in an experienced man, whose strength lies in his positive experience.

“Diseases of the first class, in their most simple form, consist in disordered sensation. Those upon which I shall offer a few remarks, are characterized by painful sensation, without tumefaction, or organic lesion. We meet, in practice, a patient who complains of paroxysms of pain in the face, or some other part of the body. It may be excruciating, subjecting the sufferer to the severest tortures for minutes, or hours, and then cease, perhaps entirely, leaving only a tenderness, or increased susceptibility to external impressions, to pressure, cold air, or motion of the muscles, either of which may be sufficient to renew the paroxysm with all its violence, at any moment; or, at longer intervals, the paroxysms may return without any assignable cause. In other cases, the severity of the pain may vary, from the most severe, down through all the grades and varieties of morbid sensation, to a trifling uneasiness, continuing most of the time; or to slight twinges of acuter pain which are momentary, and few and far between. In these cases, generally, there will be found, on examination, tenderness at the origin, in the spinal cord, of the nerves which endow with sensation the parts involved in the disease. Frequently, pressure on this portion of the spine will cause, in a greater or less degree, the renewal of the paroxysm. This tenderness may also be discovered by passing over the spine a sponge dipped in hot water. If we analyze the complaint under consideration, we shall find it to be pain, and nothing else. Pain, I conceive, always arises either from an increased irritability of the nerves of sensation, whereby mild stimulants, which, in a healthy state of these nerves, produce only pleasurable excitement, become irritants, sufficient to bring on, in some instances, the most intolerable anguish; or, from powerful stimulants, acting on sound nerves.”

Here is something to remember.

“There may be a vast deal of suffering from simple neuralgia, without material injury to the general health; that is, the vital functions may all go on regularly, and with nearly their natural vigor, notwithstanding

neuralgic distress may be a constant attendant for years. For the sentient nerves preside over no function, essential to the continuance of life, or sound organization; and consequently no organic lesion occurs in consequence of any morbid action, which is confined to this portion of the nervous system. So intimate, however, is the connection between the sentient, motor and ganglionic nerves, that intense and protracted neuralgia usually induces secondary symptoms, i. e., involves in the disease other functions than the one first affected. The fact that spinal irritation exists in a very large proportion of chronic complaints, organic and functional—complaints, which differ very essentially from each other in their other symptoms, progress and termination, has caused many eminent physicians among us to be altogether skeptical in regard to the modern doctrine on this subject. But if, as I have stated, all pain be essentially neuralgic—that, so far as this symptom alone is concerned, the pain of cancer of the face is identical with that of tic douloureux—this difficulty vanishes.”

Class second possesses no extraordinary claims, but in the third, there is plain, sound sense and philosophy. The limits of the Journal will not permit us to copy very copiously at present. We could not, however, omit the following lines.

“Inflammation may be cured in its forming stage, by diminishing the quantity of blood which proves too stimulating to the irritated ganglionic nerves; or it may be successfully treated by nauseating drugs, by cathartics, by cupping, by blistering over the origin of the spinal nerves which supply the inflamed part; or it may be arrested at once, by opium, and other narcotics. The most successful method of treating croup, with which I am acquainted, is to administer an emetic of tobacco, antimony, or sub. sulph. hydrarg., to break up and remove the forming membrane, and then to allay the irritation by opium, boldly exhibited; that is, by giving as large a dose as we feel confident the patient will bear, and repeating it at least every hour, until the desired effect, sleepiness and relief, be obtained.”

VAN COOTH ON DIETETICS.*

THIS work, to which allusion was made in a back number of the Journal, was a dissertation submitted by Dr. Van Cooth, for the degree of doctor of medicine. It commences with the history of dietetics from the earliest authentic sources, which is exceedingly rich and interesting to the medical reader. The result of his researches into the Egyptian and Persian history, is, that these nations confined themselves to a vegetable diet, and that strict temperance in eating was incorporated into their religion, as well as political institutions. Among the Israelites, however, he broaches the conjecture that animal food was eaten before the flood, grounding it on the direction in Gen. vii. 2. It is the conclusion of the learned on this point, that these animals were taken for sacrifice and not for food, though they are the same animals which in Deut. xiv. 3—20, were allowed to be eaten. A regard for cleanliness was the burden of

* *Diatribe in Dieteticam Veterum, maxime in Anr. Cornelii Celsi præcepta dietetica, Hippocratis et Galeni placitis illustrata, quam supremo favente numine, ex auctoritate rectoris magnifici, Herm. Joh. Royards, theol. doct. et prof. ord. amplissimique senatus, academici consensu, ac nobilissimæ facultatis medicæ decreto, pro gradu doctoratus, etc. etc. in Academia Rheno—Trajectina, submittit Carolus Josephus Van Cooth. Trajecti ad Rhenum, MDCCCXXXV.*

their legislation, and to this chiefly may be attributed the health and longevity of the early natives of the earth. The same was true of the early Greeks, strict temperance and thorough cleanliness being enjoined by their legislators and philosophers. This history is minutely continued through the temperate age of the Romans, to the period when conquest introduced luxury, when moral and physical deterioration commenced.

In chapter ii. the author gives the genuine writings of Hippocrates on the subject of dietetics and general regimen—viz. *de salubri victus ratione—de dieta—de insomniis—de alimento—de liquidorum usu*—and also many of his invaluable aphorisms treat on the same subject. Many works, regarded as his, were produced a century after, and are merely compilations, having the same title as the works of this distinguished author.

The second part of this volume gives an interesting history of the life and doctrines of Celsus. He enumerates his writings as *de Dietetica—Semeiotica—Therapia generalis—Pathologica—Therapeutica—Anatomia—Mat. Medica—Chirurgia—Ophthalmologia—Obstenica*. This volume, as the other production of Dr. Van Cooth, abounds with varied research, and accurate reference to every specified truth. It would be well if an acquaintance with such text books could be required of the medical student. It would give him the habit of laborious study into the writings of the ancients, and such knowledge must show him the comparatively slow progress of medical truth. Besides the rich treasures that are garnered up in these neglected store-houses, the mental discipline from the systematic study of these volumes would be invaluable to him, as a medical observer, whose opinions the scientific world would appreciate and respect.

Vaccination in Prussia.—A silver medal has been struck at the royal mint, to be presented to parents and relations of children who shall bring them forward, when vaccinated, with a view of supplying the public establishments with vaccine matter, and the public vaccination boards are permitted to use their funds for the purchase of medals to be distributed.

Stimulus of Light.—Another most powerful natural stimulus, which has been generally overlooked, or underrated as a sanatory power, is light, or the direct rays of the sun. One of the most common causes of the loss of health, and the establishment of morbid irritability in the systems of children, females, students and mechanics, is living in the shade. Like plants, growing in similar situations, a large portion of those who do not labor in the sunshine, are feeble, pale and sickly. The *solar bath*, properly used, I am persuaded would more benefit a large portion of our patients than the best selected articles of *materia medica*.—*Dr. Nichols.*

Hygeian Pills.—Have you seen, Mr. Editor, the analysis of Morison's Hygeian in the Philadelphia papers. It is said to be as follows—

No. 1. R. Gum. Aloes

Crem. Tart. partes equalis. Pills of common size.

No. 2. R. Aloes

Crem. Tart. aa 3i.

Gambog. and

Colocynth aa 3i. Pills of common size.

Please set them trundling in your Journal, and oblige

W. W.

Honorary Members of the Mass. Medical Society.—The following comprises a list of the names of gentlemen distinguished in Medicine and Surgery, who were not long since elected honorary members of this Society. Philip S. Physick, Nathaniel Chapman, Samuel Jackson, Wm. E. Horner, T. T. Hewson, Philadelphia; Valentine Mott, John Cheeseman, Edward Delafield, New York; Nathaniel Potter, William Hall, Nathan R. Smith, R. Dunglison, E. Geddings, Baltimore; Benjamin B. Simons, Joshua B. Whittredge, John Holbrook, Charleston, S. C.; Daniel Drake, Cincinnati; Benjamin W. Dudley, Charles Caldwell, Lexington, Ky.; Thomas Sewall, Washington, D. C.; Daniel Oliver, Hanover, N. H.; Benjamin Silliman, New Haven, Ct.; J. M. W. Pictou, Henry Luxemburgh, New Orleans, La.; Daniel Osgood, Havana; John Hodgkins, James Stanley, London; and John Brien, Dublin. The catalogue of honorary members will be continued hereafter.

Nervous Irritability.—Cases are sometimes met with, in which there exists so high a degree of nervous irritability of the whole sentient system, that no active treatment can be endured. I have known the application of a single leech, or a small blister, produce painful spasms; and the exhibition even of a mild cordial, or cathartic, followed invariably by distress. In these cases, there is great tenderness over the whole spinal region; and counter-irritation, if admissible at all, will be likely to do the most good on the parts of the body which are least sensitive.—Dr. Nichols.

Medical Miscellany.—The cholera has reappeared in Austrian Lombardy, in Hungary, and particularly at Salzburg.—Artificial camphor may be made by passing a current of dry hydro-chloric acid gas through oil of turpentine.—M. Poyen is lecturing on Animal Magnetism in the city of Bangor.—Dr. Jennison, late of Northampton, Mass. has been appointed chief engineer of the mint in Mexico.—Two more persons in Vermont recently entered the Thomsonian steam tubs and were taken out dead.—No person is allowed to practise dentistry in Prussia, who in his testimonials of having acquired practical dexterity in his art, shall not adduce proof of being either—1st, a licensed physician or surgeon; 2d, of having served three years as surgeon in the army; or, 3d, of having obtained such knowledge and skill as are necessary for a surgeon in a regular attendance at places of public education.—They have become possessed with the notion that a medical reform is necessary, in Spain. It is lamentable that the idea was not started seventy-five years earlier. Physicians do not rank very high, in that distracted country, for their acquirements.—In the last ten years only 175 degrees, M.B. and M.D. were granted at Trinity College, Dublin. The College of Surgeons in Ireland have given out in the same time, 314 diplomas, and Apothecaries' Hall, in the same country, in ten years, have granted 572 licenses.—The Boylston Medical Prize, for this year, has been awarded to Dr. O. W. Holmes, of this city.—The Vermont Insane Asylum is to be located at Brattleborough.—Mr. Silas Jones, author of a popular treatise on Phrenology, has been appointed principal of the Institution for the Blind, in New York. He is a first rate man for the situation.—Smallpox is rife again, it is said, in some parts of Rhode Island.—A silver cup has been awarded to Dr. Rousseau, at Paris, for discovering that holly is a febrile-

fuge.—Dr. Ruschenburger is writing a history of the cruise of the U. S. Ship Peacock, now voyaging.—The honorary degree of A.M. was conferred on Adrian R. Terry, M.D. Professor of Chemistry and Natural History in Bristol College, at the late Commencement in Washington College.—The general court of New Hampshire, at their late session, granted \$1500 for the Deaf and Dumb, at the Hartford Asylum, and \$500 for the Blind, at the Boston Asylum.—Four brothers and one sister are now living at North Providence, R. I. whose united ages amount to four hundred and five years.—The Peninsular, Mich. contains an account of the death of a young lady, at Centreville, who fell a victim to lobelia and No. 6; after suffering, for some days, the most excruciating and intense agony—the effect of the abominations which under the name of medicines were administered to her.—New Orleans and Mobile are in excellent health, no cases of yellow fever having appeared the present season.—Dr. Field, of Charlemon, Massachusetts, was present at the melancholy massacre of Col. Fanning by the Mexicans.—Dr. Gregerson, of Boston; Dr. Bridge, Dr. Thomas Spencer, and Dr. Gordon, of Lowell, have arrived in this country from Europe. Sailed—Dr. B. L. Hatch, Dr. W. Bang, Dr. J. W. Schmidt, Prof. Farrar.—A disease is said to be prevailing among horses in Newark, N. J. similar to the cholera among men, and quite as fatal.—Dr. C. T. Jackson, of this city, who was commissioned to make a geological survey of the State of Maine, has entered upon his duties. He is assisted by Mr. James T. Hedge, of Plymouth, Mass. and Dr. Purington, of Maine.—A general vaccination is about being commenced in Nantucket, by Drs. Fearing, Swift, Ruggles and Thompson, by order of the Selectmen.

Whole number of deaths in Boston for the week ending August 20, 33. Males, 18—females, 15.
Dysentery, 3—insane, 1—infantile, 4—decline, 1—palsy, 1—canker in the bowels, 1—mortification, 1—hooping cough, 1—cholera infantum, 1—disease of the heart, 1—inflammation of bowels, 1—consumption, 2—teething, 2—old age, 2—bowel complaint, 2—inflammation of lungs, 1—rheumatic fever, 1—intemperance, 1—scarlet fever, 1—convulsions, 1—palpitation of heart, 1—stillborn, 3.

MEDICAL INSTRUCTION.

THE subscribers are associated for the purpose of giving a complete course of medical instruction, and will receive pupils on the following terms:

The pupils will be admitted to the practice of the Massachusetts General Hospital, and will receive clinical lectures on the cases they witness there. Instruction, by lectures or examinations, will be given in the intervals of the public lectures, every week day.

On Midwifery, and the Diseases of Women and Children, and on Chemistry	by	DR. CHANNING.
On Physiology, Pathology, Therapeutics, and Materia Medica	- - -	" DR. WARE.
On the Principles and Practice of Surgery	- - -	" DR. OTIS.
On Anatomy	- - -	" DR. LEWIS.

The students are provided with a room in Dr. Lewis's house, where they have access to a large library. Lights and fuel without any charge. The opportunities for acquiring a knowledge of Anatomy are not inferior to any in the country.

The fees are \$100—to be paid in advance. No credit given, except on sufficient security of some person in Boston, nor for a longer period than six months.

Applications are to be made to Dr. Walter Channing, Tremont Street, opposite the Tremont House, Boston.

Jan 20—lyep

WALTER CHANNING,
JOHN WARE,
GEORGE W. OTIS, JR.,
WINSLOW LEWIS, JR.

COLLEGE OF PHYSICIANS AND SURGEONS OF THE WESTERN DISTRICT—Fairfield, Herkimer Co.—The next course of Lectures will commence on the first Tuesday in October, and continue sixteen weeks. The Lectures will be delivered as follows.

On Anatomy and Physiology, by	DR. McNAUGHTON.
On Chemistry and Pharmacy,	DR. HADLEY.
On Practice of Physic and the Diseases of Women and Children,	DR. DELAMATER.
On Materia Medica and Medical Jurisprudence,	DR. BECK.
On Surgery and Midwifery,	DR. MUSSEY.

Dr. Willoughby will also lecture on the latter branch.

Tickets for the whole course, \$56.

Any further information that is desired may be obtained from either of the above professors.

JAMES HADLEY, Register.

Fairfield, Herkimer Co. N. Y.

Aug. 10.—4t

BOYLSTON MEDICAL PRIZE QUESTIONS.

THE Boylston Medical Committee, appointed by the President and Fellows of Harvard University, consists of the following Physicians, viz.:

John C. Warren, M.D.
Rufus Wymann, M.D.
Geo. C. Shattuck, M.D.
Jacob Bigelow, M.D.

Walter Channing, M.D.
Geo. Hayward, M.D.
John Randall, M.D.
Enoch Hale, Jr. M.D.

At the annual meeting of the Committee, held on Wednesday, Aug. 3d, 1836, a premium of Fifty Dollars, or a Gold Medal of that value, was awarded to Oliver Wendell Holmes, M.D. of Boston, for a Dissertation on the following question: "How far are the external means of exploring the condition of the internal organs to be considered useful and important in medical practice?"

There were two other dissertations on the same subject of so high a character, that the Committee were desirous of bestowing upon them some mark of their approbation. But they could not draw upon the Boylston fund for more than one premium on each question. The necessary means, however, were furnished in another way, and a prize of Fifty Dollars was awarded by an unanimous vote to each of the authors of these dissertations. One of them was written by Robert W. Haxall, M.D. of Richmond, Virginia, and the other by Luther V. Bell, M.D. of Derry, N. H.

The following Prize Questions for the year 1837, are now before the public, viz.:

1st. "What is the nature of Neuralgia, and what is the best mode of treating it?"

2d. "To what extent and in what places has Intermittent Fever been indigenous in New England?"

Dissertations on these subjects must be transmitted, post paid, to JOHN C. WARREN, M.D. Boston, on or before the first Wednesday of April, 1837.

The following Questions are now offered for the year 1838, viz.:

1st. "What are the anatomical characters of Typhous Fever, and what is the best mode of treating this disease?"

2d. "What are the causes, seat and proper treatment of Erysipelatous Inflammation? (Erythema Erysipelatosum of Good.)"

Dissertations on these questions must be transmitted as above, on or before the first Wednesday of April, 1838.

The author of the successful dissertation on either of the above subjects, will be entitled to Fifty Dollars, or a Gold Medal of that value, at his option.

Each dissertation must be accompanied with a sealed packet, on which shall be written some device or sentence, and within shall be enclosed the author's name and place of residence. The same device or sentence is to be written on the dissertation to which the packet is attached.

All unsuccessful dissertations are deposited with the Secretary, from whom they may be obtained, if called for within one year after they have been received.

By an order adopted in the year 1824, the Secretary was directed to publish annually the following votes, viz.:

1st. That the Board do not consider themselves as approving the doctrines contained in any of the dissertations to which the premiums may be adjudged.

2d. That in case of the publication of a successful dissertation, the author be considered as bound to print the above vote in connection therewith.

Boston, Aug. 24, 1836.

GEORGE HAYWARD, Sec'y.

*-Publishers of Newspapers and Medical Journals, throughout the United States, are respectfully requested to give the above an insertion.

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REMOVAL.

CHARLES WHITE respectfully informs the Physicians, his friends, and the public, that he has removed to No. 233 Washington St. four doors south of Summer St. and nearly opposite his old stand.

C. W. returns his most grateful acknowledgments to the Physicians, and his friends, for their past favors, and hopes, by strict personal attention, as heretofore, to Physicians' prescriptions, and to the compounding and delivery of Family Medicines, to have a continuance.

Boston, Aug. 21.

6t

MEDICAL TUITION.

The subscribers have recently made some additional arrangements for the instruction of medical students. A suitable room is provided, as heretofore, for the use of the pupils; the necessary books are supplied; and a systematic course of study is recommended. Personal instruction is given to each pupil in each of the several departments of medical knowledge. Every facility is provided for the cultivation of practical anatomy, which the present improved state of the law permits. This department will receive the constant attention of one of the subscribers, who will always give such aid and instruction as the pupils may need.

The pupils have free admission to the lectures on Anatomy, and on Surgery, in the Medical School of Harvard University, and to all the practice of the Massachusetts General Hospital; and generally they have opportunity to attend private surgical operations.

The terms are, \$100 per annum; to be paid in advance.

JOHN C. WARREN,
GEORGE HAYWARD,
ENOCH HALE,
J. M. WARREN.

Boston, October, 1835.

June 15--eoptf

The interesting cases of Poisoning with Stramonium and of Amaurosis, came too late for this week.—The Title-page and Index of Vol. XIV. will be sent with the next No.

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR. at 184 Washington Street, corner of Franklin Street, to whom all communications must be addressed, post-paid. It is also published in Monthly Parts, each Part containing the weekly numbers of the preceding month, stitched in a cover. J. V. C. SMITH, M.D. Editor.—Price \$3.00 a year in advance. \$3.50 after three months, and \$4.00 if not paid within the year.—Agents allowed every seventh copy gratis.—Orders from a distance must be accompanied by payment in advance, or satisfactory reference.—Postage the same as for a newspaper.